MISCELLANY

Under this department are ordinarily grouped: News: Medical Economics: Correspondence: Twenty-five Years Ago column; Department of Public Health; California Board of Medical Examiners; and other columns as occasion may warrant. Items for the News column must be furnished by the fifteenth of the preceding month. For Book Reviews, see index on the front cover, under Miscellany.

NEWS

Coming Meetings.

California Medical Association, Riverside, California, April 30 to May 2, 1934. Emma W. Pope, M.D., Secretary, 2004 Four Fifty Sutter, San Francisco.

Nevada State Medical Association, Las Vegas, Nevada, September 29 to 30, 1933. Horace J. Brown, M. D., Secretary, Medico-Dental Building, Reno.

Pacific Coast Society of Obstetrics and Gynecology, Portland, Oregon, October 19 to 20, 1933. Clarence A. De Puy, M. D., Secretary, 230 Grand Avenue, Oakland.

Utah State Medical Association, Salt Lake City, September 14 to 16, 1933. L. R. Cowan, M. D., Secretary, 305 Medical Arts Building, Salt Lake City.

Medical Broadcasts.*

American Medical Association Health Talks.—The American Medical Association broadcasts on Tuesday and Thursday from 9:15 to 9:20 a. m., Chicago daylight saving time, which is one hour faster than central standard time, over Station WBBM (770 kilocycles, or 389.4 meters).

There is also a fifteen-minute talk, sponsored by the association, on Saturday morning from 9:45 to 10 o'clock over Station WBBM.

San Francisco County Medical Society.—The San Francisco County Medical Society broadcasts every Tuesday from Station KFRC, 4 to 4:15 p. m., and over Station KJBS from 11:15 to 11:30 a. m.

Los Angeles County Medical Association.—The radio broadcast program for the Los Angeles County Medical Association for the month of September is as follows:

Tuesday, September 5—KFI, 10 to 10:15 a. m. and KECA, 9:30 to 9:45 a. m. Subject, Snake Bites.

Tuesday, September 12—KFI, 10 to 10:15 a. m. and KECA, 9:30 to 9:45 a. m. Subject, What Price Health?

Tuesday, September 19—KFI, 10 to 10:15 a. m. and KECA, 9:30 to 9:45 a. m. Subject, Some Pertinent Don'ts.

Tuesday, September 26—KFI, 10 to 10:15 a. m. and KECA, 9:30 to 9:45 a. m. Subject, When You Have a Cold.

Pacific Coast Society of Obstetrics and Gynecology. The annual meeting of the Pacific Coast Society of Obstetrics and Gynecology will be held in Portland, Oregon, October 19, 20, and 21, 1933. An interesting program of operative clinics and scientific papers is to be presented.

Dr. Albert Mathieu of Portland, Oregon, is the president of the society, Dr. Lyle G. McNeile of Los Angeles is president-elect, and Dr. Clarence A. De Puy, 230 Grand Avenue, Oakland, is secretary.

Modern Knowledge of Cancer Set as Radio Talk Title.—A discussion of the nature and treatment of cancer is being arranged by the Medical School of the University of California began in August. The cancer programs will be broadcast at 3:45 p. m. on Fridays from August 4 to September 29, inclusive, over KPO, San Francisco; KECA, Los Angeles; and KFSD, San Diego.

Interstate Postgraduate Session at Cleveland.*—The International Assembly of the Interstate Postgraduate Medical Association of North America will be held in the Public Auditorium, Cleveland, Ohio, October 16 to 20, 1933. Many distinguished teachers and clinicians will appear on the program. All members of the California Medical Association are cordially invited to attend. Registration fee of \$5 admits all members of the profession in good standing.

University of California Child Welfare Work Saved by Gift of \$17,235 from East.—Fears for the research program of the University of California Institute of Child Welfare, which was seriously threatened by the legislative budget cut, were temporarily allayed by the receipt of an emergency grant of \$17,235 for the year 1933-1934 from the General Education Board of New York.

Announcement of this timely gift was made by President Robert Gordon Sproul, following its acceptance by the regents of the University.

The Child Welfare emergency fund was one of forty gifts of money, books, art treasures, and teaching equipment reported by the regents. The total amount of funds received for the month exceeded \$40,000.

Typographical Correction.—In the article on "The Physician's Interest in the Making of a Will" by Hartley F. Peart, Esq. (July California and Western Medicine, pages 20 and 21), one paragraph, as there printed, stated "three-fifths." This was in error, and should have read "four-fifths," to make the meaning clear. In other words, only one of the two-fifths referred to is subject to the will, and the will is also applied to the remaining three-fifths, that is, in all to four-fifths of the estate.

Inactive Duty Training for United States Army Medical Department Reserve Officers.—The medicomilitary course of inactive duty training for Medical Department Reserve officers, which has been held at the Mayo Clinic during the past four years, will again be held this year from October 1 to 14, both dates, inclusive. The inactive duty training will follow the plan so well worked out under the auspices of Colonel George A. Skinner, and the military features will be under his personal supervision.

This type of military medical training is now well established, and has proved its worth during the past four years. The course offers valuable and interesting training for the Medical Department officers of all the components of our national defense. The staff and faculty of the Mayo Clinic have again placed their unexcelled facilities at the service of their gov-

^{*}County societies giving medical broadcasts are requested to send information as soon as arranged (giving station, day, date and hour, and subject) to CALIFORNIA AND WESTERN MEDICINE, 450 Sutter Street, San Francisco, for inclusion in this column.

^{*}A major list of the names of the contributors to the program, with other information, appears on page 31, advertising section of this journal.

ernment in the interest of preparedness, and have extended an invitation to all the services to participate.

This short course is equally applicable to general practitioners and specialists. The morning hours are devoted to purely professional subjects selected by the student officers. The afternoon hours pertain solely to medico-military subjects, and the evening hours are covered in a lyceum course of general interest.

Application for this course of inactive duty training

should be made to the Corps Area Surgeon, Seventh Corps Area, Omaha, Nebraska. Applications should state the character of the work the candidate desires to follow in the morning hours. All student officers are expected to attend and participate in the afternoon and evening sessions. Each applicant should fully understand that the invitation to accept this course of study without charge is extended by the Mayo Clinic; that the project is without expense to the Government; and that one hundred hours' credit will be given those who take and complete the course. While it is desirable to attend the entire course, those whose time will not permit this may join or leave at any time and will receive credit for the hours spent in training. Uniforms are optional.

CALIFORNIA'S CLINIC LAW *

Assembly Bill No. 1277, Chapter 756-Approved by Governor James Rolph, Jr., June 5, 1933

The title of the above referred to clinic law states that the Act provides "for the issuance and revocation of such permits (to operate clinics) by the State Board of Public Health." It therefore became incumbent upon the State Health Board to study the measure. In order to avoid complications, the board instructed its director to send to the Attorney General of California some questions in which information was requested on certain sections of Assembly Bill No. 1277. Since much publicity has been given to this new law, the reply of Attorney General Webb is here printed for the information of members of the California Medical Association who are on the staffs of, or who are interested in clinics. Attorney General Webb's letter follows:

San Francisco, August 18, 1933.

Hon. Giles S. Porter. Director, Department of Public Health, 312 State Building, San Francisco, California. Dear Sir:

San Francisco, California.

Dear Sir:

In your communication of the 29th of June, 1933, you refer to Chapter 756 of the Statutes of 1933, better known as the "Clinic Law," and ask the advice of this office concerning a number of sections thereof.

Your first four questions pertain to what are and what are not clinics under Section 1 of the Act.

In answering these questions, I first direct your attention to the fact that there are two classes of clinics defined by that section. The first class of clinic (Clause A) is a "place, establishment or institution maintained, conducted and operated" "for the purpose of furnishing at such place, establishment or institution maintained, conducted and operated" "for the purpose of furnishing at such place, establishment or institution" "advice, diagnosis, treatment, medicine, drugs, appliances or apparatus to persons" "afflicted with bodily and/or mental diseases or injuries." To come within the terms of such classification and therefore be subject to regulation, a clinic must be operated "under the name or title of clinic or dispensary, or health center, or any other words or phrases of like or similar import"; but in this connection it is my opinion that any words or phrases which convey to the public the thought that the concern is equipped to, and does, render advice, diagnosis or treatment to, or prescribes or administers medicines or drugs for or to, or maintains appliances or apparatus for the special use of, persons afflicted with bodily and/or mental diseases or injuries, would constitute a name or title sufficient to bring the concern within that requirement of the statute. Furthermore, I am of the opinion that such name or title need not be the sole or main name or title of the concern, but it is sufficient if such words or phrases are used in conjunction with or in advertising the main name or title of the concern, but it is sufficient if such words or phrases are used in conjunction with or in advertising the main name or title of the concern. The question to

concern reveal that purpose. That this was the intent of the Legislature is made evident by the further pro-vision that concerns fall within such classification whether operated "independently or in connection with any other purpose."

The second classification (Clause B) consists of those "places, establishments or institutions maintained, conducted and operated" "for the purpose of advising and informing persons of means and measures to prevent or avoid disease or injury." As to this second class of clinics, it is immaterial under what title or name the venture is conducted.

1. An ordinary drug store, unless it holds itself out to give preventative advice, under clause "b," or unless it uses the name clinic, dispensary, health center, or the like, as hereinbefore explained, and makes a practice of furnishing advice, diagnosis, treatment, medicines, drugs, appliances or apparatus to persons "afflicted with bodily and/or mental diseases or injuries," does not come within the terms of the Act, and is not subject to regulation thereunder. thereunder.

the terms of the Act, and is not subject to regulation thereunder.

2. A concern which sells braces, artificial limbs, exercising machines and the like, does not come within either definition of a clinic, if it proposes to do no more than to sell such things, or to maintain them for the uncontrolled use of persons desiring to use them. If, on the other hand, it holds itself out to diagnose the ailments of, or to give treatments to, or to control the use of such appliances or apparatus by, persons afflicted with bodily and/or mental diseases or injuries, or to give advice and information as to means or measures to prevent or avoid disease or injury, then such concern is a "clinic," as defined by the statute, and is subject to regulation.

The sale of such mechanical equipment by a drug store would not constitute a drug store a "clinic"; but, if the drug store held itself out to render the additional services heretofore mentioned, such drug store would be a "clinic."

3. Under clause "b" there is no specific requirement

if the drug store heid itself out to render the additional services heretofore mentioned, such drug store would be a "clinic."

3. Under clause "b" there is no specific requirement that there be personal contact between the clinic and the persons to whom advice is given. However, I am of the opinion that such a requirement is implied, first, by reason of the fact that it must be some place, establishment or institution "maintained, conducted and operated" to constitute a "clinic"; second, because the Legislature has used the terms "dispensary" and "health center" as closely related in meaning with the term "clinic"; and, third, because the five classes into which all clinics are divided by Section 3 of the Act, all contemplate that the persons to be treated or advised shall come to such place, establishment or institution for treatment or advice. From these circumstances, I draw the further deduction that the advice and information specified in clause "b" of Section 1 was intended to mean advice and information given to individuals as applicable to them and their particular ailments and conditions, and not advice and information which would be applicable, generally, to all types and classes of people. For example, I do not believe that the Legislature regarded the publication of a magazine dealing principally with matters of hygiene, sanitation, physical culture, right thinking, or the like, to be or constitute a "clinic." Nor do I think that the radio broadcasting of lectures on such subjects would constitute either the broadcasting company or the lecturer a "clinic." Similarly, the publication of health columns in a newspaper does not bring the newspaper under the Act. That these conclusions are correct is made evident by the fact that such broadcasting of information to the public at large (no fee being paid by the individuals who receive such information) falls under no one of the five classes into which all clinics are divided by Section 3 of the Act.

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5. Your next question concerns what is a "nominal charge" as the term is used in Section 3 (a) of the Act. There is no legal definition of that term in the Act, and the question is one of fact. The word "nominal," alone, is legally defined to mean not real or substantial. I would say that under Section 3 (a) a nominal charge is ordinarily one which is relatively insufficient to defray the cost of rendering the service or advice. However, in this connection, as the term "nominal charge" is used in Section 3 (a), in conjunction with the clause "on account of administrative costs if approved by the Director of Public Health . . . " it would seem that any charge made to defray administrative costs, if approved by the director, would be a "nominal charge" within the meaning of that section and for the purpose of applying its provisions.

6. Calling my attention to Section 3 (b) of the Act, and more particularly to the clause "and supported in whole or in part by any trust, donation, bequest or foundation," you ask how large such trust, donation, bequest or foundation would have to be. My answer is that such question is one of fact, upon which the State Board of Health would have to rule. In any event, the trust, donation, bequest or foundation would have to be a substantial one; that is, it would have to supply a substantial part of the operating expenses of the particular institution. The larger the institution, the larger the trust, donation, bequest or foundation would have to be in order to bring that institution within the classification mentioned. Except in a case of abuse of discretion, the determination of the board would control.

7. Your next question pertains to Section 3 (c) of the Act. You wish to know whether a clinic maintained by an employer would have to be operated solely for clinical services to be rendered to its employees or whether it

^{*} See also this number of CALIFORNIA AND WESTERN MEDICINE, page 204, for editorial comments.